

## Application Information

## Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israel
Status::	Full Capacity
Given Name::	Gady
Family Name::	Shlasky
City of Residence::	Kochav Yair
Country of Residence::	Israel
Street of mailing address::	4 Hagilboa Street
City of mailing address::	Kochav Yair
Country of mailing address::	Israel

Postal or Zip Code of mailing address:: 44864

### **Correspondence Information**

Correspondence Customer Number:: 07278

### **Representative Information**

Representative Customer Number:: 07278

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	09/702,047	10/30/00